



# AFGHANISTAN EMERGENCY SITUATION REPORT

No. 36 | January 2024

## Key figures (monthly)

**344,394**

People received emergency health care service (PHC & Hospitals)

**7,617**

People received trauma care services (IPD+OPD)

**1,034**

Medical kits provided

**117**

Health workers trained

**114**

Surveillance support teams deployed to outbreak areas

## Summary of outbreaks

**231,496**

COVID-19 confirmed cases from the beginning of outbreak

**160,881**

ARI-Pneumonia (2024)

**8,420**

AWD (2024)

**2,757**

Measles (2024)

**199**

Dengue fever (2024)

**24**

CCHF (2024)



WHO Surveillance Support Teams (SSTs) active surveillance in earthquake-affected areas in Herat province. Copyright: WHO Afghanistan

## Overview:

World Health Organization (WHO) continued supporting routine activities in all supported health facilities during the month of January 2024. Major highlights for 2024 are:

- WHO Health Emergencies Programme (WHE) programme review meeting was organized and conducted from 24 to 25 January in Kabul, with participants from Kabul and seven regions. The aim of the meeting was to review the progress of last quarter, identify challenges and bottle necks for activities implementation and to ensure WHE team work in close coordination for upcoming months.
- The most commonly reported epidemic-prone infectious diseases during January were Acute Respiratory Infections (ARIs), Acute Watery Diarrhea (AWD) and measles.
- WHO continued supporting health activities in earthquake affected areas in Herat province in western Afghanistan.

## Health Cluster:

- 54 Health Cluster partners provided humanitarian health services to approximately 1.4 million individuals. These services were delivered through 908 health facilities across 317 districts, encompassing all 34 provinces of Afghanistan.
- The Health Cluster concluded the Cluster Coordination Performance Monitoring (CCPM) survey, with a 71% response rate from partners (48 out of 68). The survey assessed the Health Cluster's performance against various core cluster functions, including support to service delivery, informing strategic decision making, planning and strategy development, monitoring and reporting, preparedness for recurrent disasters, advocacy, and accountability to affected populations (AAP). The Health Cluster's performance was rated good across these functions.

- The Humanitarian Needs and Response Plan (HNRP) for 2024 has been finalized, published and shared with all the health cluster partners at the national and sub-national levels.
- Regional Health Cluster coordination teams have collaborated with health partners across all seven regions (eastern, southern, southeastern, western, north, northeastern, and central). Their activities encompass the development and operationalization of contingency plans, regular weekly and ad-hoc coordination meetings with relevant authorities and health partners and undertaking joint missions with the Provincial Public Health Directorates (PPHDs), partners, and UN agencies to monitor/assess the health response.
- As part of AAP, Regional Health Cluster Coordinators (RHCCs) followed up on community concerns and complaints, especially from the earthquake-affected people, reported through the AWAAZ-e-Afghanistan platform. RHCCs worked closely with implementing partners and relevant authorities to address and resolve these issues.
- A total of 20 Health Cluster partners supported the health needs of individuals affected by the Herat earthquake. These partners included AADA, AFGA, ARCS, CARE, HEALTHNET TPO, HI, IOM, IRC, IRW, JACK, JHPIEGO, MMRCA, MOVE, OCCD, OHPM, UNFPA, UNICEF, WHO, WVI, and YHDO. From 7 October 2023 to 31 January 2024, these partners delivered health services to a total of 145,684 individuals across six earthquake-affected districts. In Zindajan, 84,318; in Injil, 18,093; in Kushk, 14,666; in Kohsan, 10,784; in Herat City, 9,850; and in Gulran, 7,973 individuals benefited from health services. Among the beneficiaries, 120,934 individuals received primary health care, which included reproductive health and Mental Health and Psychosocial Support (MHPSS) services. Additionally, 14,937 individuals benefited from services focused on the prevention, detection, and response to communicable diseases outbreaks. Trauma care and rehabilitation services were provided to 5,579 individuals, while various kits such as mama and baby kits, dignity kits, and individual cleaning delivery kits were distributed to 4,234 individuals.
- A total of 25 Health Cluster partners supported the health response to returnees. The partners involved were: AADA, AFGA, ARCS, BARAN, HEALTHNET TPO, HEWAD, HMLO, INTERSOS, IOM, IRC, IRW, JACK, MEDAIR, MMRCA, OHPM, ORCD, PU-AMI, SCA, SCI, TDH, WORLD, WVI, UNFPA, UNICEF, and WHO.
- Key activities carried out by the Health Cluster Coordination Team and the partners to support the health response for returnees included:
  - » Between 1 November 2023 to 27 January 2024, the Health Cluster partners provided health services to a total of 272,133 returnees. Out of the total beneficiaries, 142,284 individuals received primary health care services, 20,454 received secondary health care services, 67,734 were reached with health promotion activities, 18,753 received maternal, newborn, and child health services, 22,255 received MHPSS services, and 653 received trauma care services.
  - » The Health Cluster has effectively coordinated the health response for returnees by leveraging the collective efforts of all partners and stakeholders at the national and regional levels.
  - » To ensure effective resource allocation and a coordinated response to returnees, the RHCCs in the south and eastern regions held bilateral meetings with the PPHDs in Kandahar and Nangarhar provinces, as well as with the partners supporting the health response for returnees.
  - » Bi-weekly Migration Health Task Force meetings were conducted. Along with providing updates on the returnees' situation and response, the Task Force agreed to develop a guideline for the border health package.
  - » The Migration Health Task Force had a joint mission to Kandahar province to provide support to the field health team and enhance the health response to accommodate a potential increase in the number of returning undocumented Afghan migrants.
  - » The Multisectoral Needs Assessment from the returnees' place of origin is ongoing in the northeast and southeast regions to identify the current needs and gaps of returnees.



Monitoring the health facilities serving for the earthquake affected people in Zindajan district, Herat province. Copyright: WHO Afghanistan




The Migration Health Task Force joint visit from Spinboldak zero point in Kandahar province. – Copyright: Migration Health Task Force


## Health Service Delivery (Primary Health Care and Hospitals)


During the month of January 2024, WHO provided health care services in 222 Primary Health Care (PHC) centres in 25 provinces through seven NGO partners across the country.


A total of 344,394 patients received outpatient consultations (259,789: PHC; 84,605: Hospital), 48,541 clients received immunization services (44,879: PHC; 3,662: Hospital), 14,417 individuals were provided with MHPSS counseling sessions (PHC: 13,210; Hospital: 1,207), 2,314 deliveries were handled (PHC: 1,619; Hospital: 695), 11,266 pregnant women received antenatal care (ANC) (PHC:10,249; Hospital: 1,017), and 6,889 women received postnatal care (PNC) (PHC: 5,775; Hospital: 1,114). Furthermore, 38,029 children under 5 were screened to assess their nutritional status (PHC: 35,777; Hospital: 2,252).

WHO supported 15 secondary and tertiary care hospitals across the country, comprised of nine infectious diseases hospitals, three maternity hospitals, two emergency hospitals and on mental health hospital.



 **344,394**  
People received OPD consultations

 **268,062**  
Patients received essential drugs for their basic health services


 **11,266**  
Women received ANC


 **6,889**  
Women received PNC

## Sustaining health care services delivery

Beneficiaries of PHC & Hospital services at WHO-supported facilities for January 2024 (Total : 344,394)			
Age	 Male	 Female	
Over 18 years	89,713	146,058	
Under 18 years	55,119	53,504	

 **2,314**  
Institutional deliveries

 **48,053**  
Number of consultations for Non-communicable diseases

 **27,621**  
Pregnant, CBA Women and under 5 children received TT2+, measles, and PENTA-3 Vaccination



Health Camp programme in Zarshura Secondary Health Care (SHC) in Gorbaz district, Khost province. Copyright: WHO Afghanistan

### Trauma and Physical Rehabilitation:

From 28 January to 01 February, WHE trauma unit conducted a five-day Basic Emergency Care (BEC) training for 51 first contact health staff from the western region, including 25 women, in Herat province. These staff were from 17 health facilities in Ghor, Farah, Badghis, and Herat provinces.

#### Trauma care services

Beneficiaries of trauma care services at WHO-supported facilities for January 2024 (Total: 7,617)		
	Male	Female
Over 18 years	2,743	1,027
Under 18 years	2,343	1,504

#### Post trauma rehabilitation

Beneficiaries of post trauma rehabilitation services at WHO-supported facilities for January 2024 (Total : 24,987)		
	Male	Female
Over 18 years	9,197	6,133
Under 18 years	4,631	5,026



Basic Emergency Care (BEC) training



**1,875** patients received physiotherapy



**4,875** patients received blood transfusion



**8,742** patients received minor surgical operation

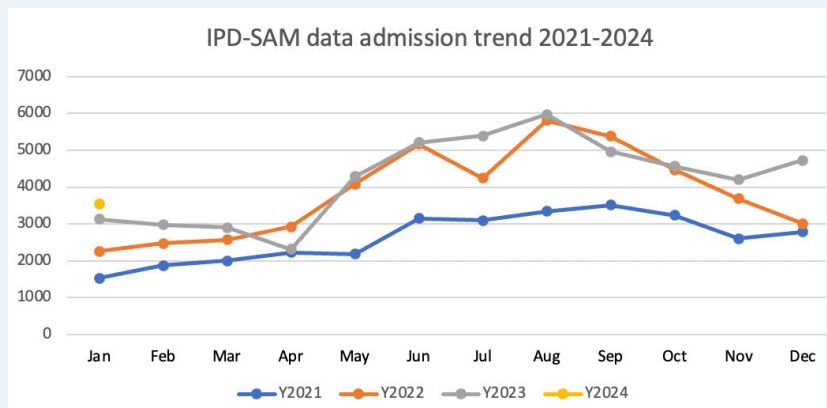


**3,148** patients received major surgical operation

### Nutrition

- A total of 3,547 (1,703 girls and 1,844 boys) malnourished children under five years of age with medical complications admitted (Target:4,242 for Jan 2024. 94.8% of the total target) and treated in 130 WHO supported IPD-SAM centers (127 hospitals and 11 Comprehensive Health Centers plus). The total admissions are increased this January 2024 as compared to January 2023 and suggestive of increase in malnutrition in Afghanistan than last year.
- WHO is helping strengthen the national capacity to respond to food insecurity and malnutrition. 28 male doctors and nurses from Kabul, Ghazni, Paktika, Khost and Maidan Wardak provinces received training on management of complicated severe acute malnutrition.

Beneficiaries of 127 WHO-supported IPD-SAM centers for January 2024		
Under five	Boys	Girls
3,547	1,703	1,844



**33,102** Pregnant and lactating women received malnutrition screening and Infant and Young Child Feeding (IYCF) counselling and treatment services



**10,392** Women received family planning services and awareness



**74,443** Under 5 children received OPV, malnutrition treatment and screening

## Infectious Hazard and Surveillance

Monthly summary of infectious diseases outbreaks in Afghanistan, January 2024 (updates until 27 January)

Indicators	AWD	ARI-Pneumonia	COVID-19	Measles	CCHF	Dengue
Monthly new cases (% change compared to Dec 23)	8,420 (↓10.6)	160,881 (↑11.9)	851 (↓37.3)	2,757 (↑69.1)	24 (↑100.0)	199 (↓7.4)
Monthly new deaths (CFR%)	8 (0.10)	383 (0.24)	8 (0.94)	7 (0.25)	0 (0.00)	0 (0.00)
Cumulative cases (2024)	8,420	160,881	231,496	2,757	24	199
Cumulative deaths (2024)	8	383	7,979	7	0	0

### Acute Watery Diarrhea (AWD) with dehydration

- A total of 8,420 AWD cases with dehydration were reported, which shows a decrease of 10.6 % compared to December 2023, with a total of eight associated deaths (monthly CFR of 0.1%).
- Out of 8,420 cases reported, 4,632(55%) were under-five children and 4,154 (49.3%) were females.

### Crimean-Congo Hemorrhagic Fever (CCHF)

- The number of suspected CCHF cases showed a 100% increase (24 suspected cases in January 2024 compared to 12 cases reported in December 2023), with no deaths.
- Out of 24 suspected CCHF cases reported, 35% (6) are females, and all the cases are above five years of age.

### COVID-19

- During the last month, the number of confirmed COVID-19 cases showed a decrease of 37.3% (851 cases were reported during January 2024 compared to 1,357 during December 2023) with eight associated deaths (monthly CFR 0.9%).
- As of 27 January 2024, 951,747 COVID-19 cases have been tested in public health laboratories, with cumulative confirmed cases of 231,496 (24.4% positivity rate) and 7,979 deaths (CFR of 3.4%). Currently, WHO is providing regular support to 34 COVID-19 labs in terms of medical and non-medical supplies and other miscellaneous items, with a testing capacity of 8,400 cases per day.
- During the reporting period, a total of 10,227 samples were tested in public laboratories, which is lower by around 27% compared to the number of tests conducted in December 2023 (14,067), with the test positivity rate of 8.3%.
- During the reporting period, around 191,000 individuals have been vaccinated, and the proportion of those who received at least one dose increased to 41.3%.

### Measles

- A total of 2,757 suspected measles cases were reported from the beginning of 2024 till 27 January 2024. This represents a 69.1% increase in the number of suspected cases compared to the previous month, with seven reported deaths (monthly CFR 0.25%).

### Dengue fever

- A total of 199 suspected dengue fever cases were reported during the reporting period, which shows a 7.4% decrease compared to the number of cases during the previous month.

### Active surveillance of Herat earthquake-affected areas

- Five dedicated Surveillance Support Teams (SSTs) with two assigned vehicles are doing active surveillance in the earthquake-affected areas of Zenda Jan district in Herat province. During 01-27 January, below infectious diseases have been detected:
  - » 3,426 ARIs cases.
  - » 54 AWD cases.
  - » 2 suspected measles cases.
  - » 126 confirmed COVID-19 cases.
- A total of 946 rapid diagnostic tests (RDTs) and 1,459 polymerase chain reaction (PCR) tests were conducted for suspected COVID-19 cases; of which, 4 and 122 were positive respectively (RDT positivity rate: 0.4%, PCR positivity rate: 8.4%).
- A total of 4 RDTs were conducted for AWD cases; all results were negative.
- Samples were tested from the two suspected measles cases and the results were negative.

Districts	Diseases	Number of reported cases During 01–27 Jan 2024						
		Male		Female		Total		
		<5 Years	>5 Years	<5 Years	>5 Years	Male	Female	Total
Zinda Jan	ARI	365	1,259	348	1,454	1,624	1,802	3,426
	Measles	0	0	1	1	0	2	2
	AWD	26	6	14	8	32	22	54
	Tetanus	0	0	0	0	0	0	0
	Confirmed COVID-19	0	41	0	85	41	85	126

**Surveillance updates on returnees**


- There were two public health authority teams (each team consisting of eight members) functional in two Points of Entry (PoEs) i.e. Torkham and Islam Qala in Nangarhar and Herat. In addition, three SSTs (one in Torkham, one in Kandahar, and one in Paktika), each team consisting of two members, were deployed to screen, detect, collect, store, and transport samples from the relevant locality to Regional Reference Labs (RRLs).
- During January 2024, a total of 150,742 returnees have been screened for various infectious diseases. Among those screened returnees, a total of 390 suspected COVID-19 cases, 1,016 ARIs cases, 43 suspected dengue fever cases, 226 AWD with severe dehydration cases and one suspected CCHF case were detected.
- 362 RDTs were conducted for suspected COVID-19 cases, of which 68 were positive (18.8% positivity rate). Additionally, 141 PCR tests were conducted for


COVID-19, of which 24 resulted positive (17% positivity rate). 41 RDTs for suspected dengue fever, 15 RDTs for AWD with severe dehydration, and one PCR test for suspected CCHF cases were conducted, all of which yielded negative results.

**Supplies**

- 469 doses of Ribavirin 200mg tablets, and 1,530 Ribavirin vials have been delivered to seven WHO regional sub-offices.
- More than 25,000 rabies vaccine with diluent have been supplied to seven WHO sub-offices.
- 380 kits of RDTs for dengue fever have been supplied to Nangarhar, Laghman and Kunar National Disease Surveillance and Response (NDSR).
- 50 kits of viral transport media (VTM) have been delivered to Kunduz NDSR.
- 700 anti-scabies medicines (permethrin 5%) have been delivered to Kunduz, Nangarhar, Kandahar, Herat and Mazar WHO sub-offices.
- 4,000 VTM for COVID-19 sample collection, storage and transportation have been sent to Wardak NDSR.

**Mental Health and Psychosocial Support**

 **14,417**  
Individuals received mental health consultations

 **6,334**  
people received psychological counselling

- WHO conducted a six-day mhGAP IG training from 13-18 January 2024 in Kabul for 27 doctors working in Primary Health Care (PHCs) (10 from Kunduz, 3 from Badakshan, 10 from Baghlan) and four from Drug Addiction Treatment Centre (DATC) in Nanghar. These health staff were trained on assessment and management of patients with mental, neurological and substance use disorders in non-specialized health care settings.
- Another six-day training was conducted from 27 January to 01 February 2024 on Problem Management Plus (PM+) in Khandar. A total of 28 health care workers (14 psychologists and 14 social workers) were trained from two DATCs on assessment, management and follow up of the patients with common mental health conditions according to PM+ methodology .
- The WHO Country Office in Afghanistan has extended support to the National Mental Health Hospital (NMHH) in Kabul for the year 2024. This support has been facilitated through funding from the European Union (EU).
- On 18 January 2024, the MHPSS expert from WHO visited UNICEF School Kabul (Creche, Based in UNOCA) for a psychological assessment. These students belong to staff members working with different UN agencies. In total, 33 students and three teachers are at the school.



Problem Management Plus training in Khandar. Copyright: WHO Afghanistan

The MHPSS officer performed the psychological assessment and provided recommendations to improve the mental health of the children.

**Drug Demand Reduction Services (DDRS)**

- WHO conducted a five-day training on “Treatment and Rehabilitation of Drug Use Disorders” for the 30 clinical staff at Kabul. Participants attended the training from 100-bed Female and Children DATCs with active collaboration of the National Drug Demand Reduction (DDR) Programme.of activities and programs including representatives from UNODC, UNDP, UN Women, Japan Embassy, Afghanistan National Programme for control of AIDS/ HIV, STI & Hepatitis (ANPASH) and WHO and UNODC’s implementing partners.

## Water, sanitation and hygiene (WASH)

WHO has conducted assessments regarding WASH and waste management services in 23 health facilities. The assessments have revealed limited availability of water, sanitation, hygiene, and waste management services in those health facilities, and identified areas for improvement.

WASH activities in the six health facilities of East Region (Kunar and Laghman provinces) are completed 100%. The activities mainly focused on ensuring water supply by extending the pipes from water sources, solarization and construction of water storage facilities.

## Risk Communication and Community Engagement (RCCE)



**178,560**

People living in remote and underserved areas received health education and awareness

WHO co-chaired the RCCE Sub-working Group (SWG) monthly meeting to discuss RCCE plans and priorities of health partners for 2024. The SWG is led jointly by WHO and UNICEF and its members include focal points from more than 13 organizations.

## Health logistical support



**268,062**

Patients received essential drugs for their basic health services



**1,034**

People benefited from assorted medical supplies

A total of 1034 different types of medical kits were distributed during the month of January 2024 as follows:

Kits	# of Kits
PED-SAM	599
IEHK Supplementary	7
IEHK Basic	38
TESK	330
NCD kits	60
<b>Total</b>	<b>1,034</b>



Installation of water tank at Shamash (Sohil Tangi BHC) water supply extension and tank installation at Kareen SHC, Kunar.

## Project Monitoring Unit (PMU)

To ensure proper oversight of project implementation, WHO has conducted systematic and regular monitoring and evaluation (M&E) activities through 34 monitoring officers on the ground, using specific tools developed for each type of health intervention. In January 2024, WHO conducted monitoring visits to 153 primary health care facilities including the Bill and Melinda Gates Foundation (BMGF) funded project, and 16 hospitals (including integrated infectious diseases and COVID-19 hospitals, DATCs and emergency hospitals). The identified areas of improvements were strictly followed up at the health facility level and the new identified areas will be followed up with the implementing partner to ensure mitigation measures take place.

## Preventing and Responding to Sexual Exploitation, Abuse and Harassment (PRSEAH)

Taking into consideration the impact that sexual misconduct (SM) can have on affected communities, WHO has continued to take critical and precautionary measures to mitigate the risks of SM in the delivery of emergency health services in Afghanistan.

### Trainings:

- 30 female frontline health care workers responding to the Herat earthquake were trained on prevention and response to sexual misconduct, with a special focus on expected codes of behaviour, survivor-centred approach and channels to pass on concerns and reports on sexual misconduct.
- Communities find it difficult to report sensitive issues such as bad behavior from anyone including those sexual in nature. To address this issue, WHO has trained 52 female health workers in Herat and Kabul from DATCs on Sexual Exploitation and Abuse (SEA) standard procedures, equipped them with skills to handle disclosures, receive and refer sexual misconduct cases to WHO. Frontline health care practitioners as partners of the United Nations are under obligation to report through the available and appropriate channels within the agencies, any disclosures, suspicions, rumors, or allegations of SEA.



WHE programme review meeting.

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